

Program E: Auxiliary Account

Unless otherwise indicated, all objectives are to be accomplished during or by the end of FY 2003-2004. Objectives may be key or supporting level. The level of the objective appears after the objective number and before the objective text.

Performance indicators are made up of two parts: name and value. The indicator name describes what is being measured. The indicator value is the numeric value or level achieved within a given measurement period. For budgeting purposes, performance indicators are shown for the prior fiscal year, the current fiscal year, and alternative funding scenarios (continuation budget level and Executive Budget recommendation level) for the ensuing fiscal year of the budget document. Performance indicators may be key, supporting, or general performance information level. Key level is indicated by a "K" in the "Level" column of the standard performance indicator table. Supporting level is indicated by an "S" in the "Level" column of the standard performance indicator table. General Performance Information indicators appear in tables labeled as General Performance Information.

DEPARTMENT ID: 09 - Department of Health and Hospitals
 AGENCY ID: 09-306 Medical Vendor Payments
 PROGRAM ID: Program E: Auxiliary Account

1. (SUPPORTING) Objective 1: To ensure the collection and utilization of 100% of the additional funding via the implementation of the Nursing Home Intergovernmental Transfer Program as appropriated.

Strategic Link: This objective implements Goal 1, Objective I.1 of Program E, Auxiliary Program, of the revised strategic plan: *To ensure the collection and utilization of 100% of the additional funding via the implementation of the Nursing Home Intergovernmental Transfer Program as appropriated each year through 2006.* (New Goal to be added as part of upcoming Strategic Plan revision).

Louisiana: Vision 2020 Link: Vision 2020 is directly linked to Medical Vendor Payments as follows: Goal Three: *To have a standard of living among the top ten states in America and safe, healthy communities where rich natural and cultural assets continue to make Louisiana a unique place to live, work, visit, and do business.* Objective 3-7: *To improve the quality of life of Louisiana's children.* Benchmark 3.7.1 relates to the LaCHIP program. In addition, Medical Vendor Payments is actively engaged in supporting Goal One, Objective 8 of Vision 2020: Goal One: *To be a Learning Enterprise in which all Louisiana businesses, institutions, and citizens are actively engaged in the pursuit of knowledge, and where that knowledge is deployed to improve the competitiveness of businesses, the efficiency of governmental institutions, and the quality of life of citizens.* Objective 8: *To improve the efficiency and accountability of governmental agencies.*

Children's Budget Link: In general child/adolescent services identified in this budget unit are indirectly linked to the Children's Cabinet via the Children's Budget. The Children's Budget reflects funding and expenditures for a broad range of Medicaid services for children under 21 years of age. The specific links to the recommended funding priorities for the Children's Cabinet for SFY 2001-2002 are as follows: Priority 2. Increase of SOBRA Pregnant Women to 200% of FPL.

Other Link(s): Not Applicable

Explanatory Note: This objective relates to the funding mechanism only. Information regarding services provided by Medicaid may be found in the individual programs.

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					
			YEAREND PERFORMANCE STANDARD FY 2001-2002	ACTUAL YEAREND PERFORMANCE FY 2001-2002	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2002-2003	EXISTING PERFORMANCE STANDARD FY 2002-2003	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2003-2004	PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2003-2004
13944	S	Amount of funds available in millions	\$624,181,027	\$726,482,393	\$193,747,835	\$193,747,835	\$6,998,740 ¹	\$6,998,740

¹ At the time this program was initiated, based on agreement with the Centers for Medicare and Medicaid Services (formerly HCFA), Louisiana was only allowed to collect the differential between the Medicaid rate and the Medicare Upper Payment Limit in the aggregate for all 290 nursing facilities for two years. The two year period began on October 13, 2000 and ended on September 30, 2002. For services on or after October 1, 2002, Louisiana can only collect the differential for the six non-state operated public nursing facilities participating in the Medicaid program. On July 1, 2002 the Medicaid Nursing Home rate went up. Effective October 1, 2002, the Medicare Nursing Home rate went down which reduced the difference further.